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## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: \_\_\_\_\_

### Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
Sm./Lg.				Sm. Entry	Lg. Entry		
Basic Filing Fee	201/101	51			690		
Total Claims > 20	203/103	20			558		
Independent Claims > 3	202/102	16			1014		
Multi. Dep Claim Present	204/104						
Surcharge	205/105				130		
English Translation	139						
<b>TOTAL FEE CALCULATION</b>							

Fees due upon filing the application.

Total Filing Fees Due = \$ 2392

Less Filing Fees Submitted - \$ \_\_\_\_\_

BALANCE DUE = \$ 2392

Office of Initial Patent Examination

Figure 7

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	51 minus 20 =	31
INDEPENDENT CLAIMS	16 minus 3 =	13
MULTIPLE DEPENDENT CLAIM PRESENT		

**SMALL ENTITY TYPE** ☐ OR

**OTHER THAN SMALL ENTITY**

RATE	FEE		RATE	FEE
	345.00	OR		690.00
X\$ 9=		OR	X\$18=	558
X39=		OR	X78=	1014
+130=		OR	+260=	
TOTAL		OR	TOTAL	2564

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

	(Column 1)		(Column 2)		(Column 3)	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	
	Total	51	Minus	31	=	-
	Independent	16	Minus	13	=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

**SMALL ENTITY** OR

**OTHER THAN SMALL ENTITY**

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

	(Column 1)		(Column 2)		(Column 3)	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	
	Total	51	Minus	31	=	-
	Independent	16	Minus	13	=	-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

	(Column 1)		(Column 2)		(Column 3)	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	
	Total	30	Minus	51	=	
	Independent	15	Minus	16	=	-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.